2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30105

Entity Name: LORAM MAINTENANCE OF WAY, INC.

Current Principal Place of Business:

3900 ARROWHEAD DRIVE ATTN: TAX DEPARTMENT HAMEL, MN 55340-9529

Current Mailing Address:

3900 ARROWHEAD DRIVE PO BOX 188

ATTN: TAX DEPARTMENT HAMEL, MN 55340-9529 US

FEI Number: 41-0950401 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC. 155 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Address

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIR Title DIR

Name AMUNDRUD, J K Name MANNIX. R N

Address SUITE 600, 1100 FIRST STREET SE Address SUITE 600, 1100 FIRST STREET SE

CALGARY AB T2G 1-B1 City-State-Zip: CALGARY AB T2G 1-B1 City-State-Zip:

Title DIR Title **VCFO**

Name WILSON, P V Name CHERREY, D D

SUITE 600, 1100 FIRST STREET SE Address 3900 ARROWHEAD DRIVE PO BOX Address

188

City-State-Zip: CALGARY AB T2G 1-B1 ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529 DIR Title

Name HOMAN, PJ Title **PCEO**

Address 3900 ARROWHEAD DRIVE PO BOX HOMAN, PJ Name 188

3900 ARROWHEAD DRIVE PO BOX

HAMEL MN 55340-9529 City-State-Zip: ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529 Title VΡ

Name ISDAHL, DH Title DIR

3900 ARROWHEAD DRIVE Address Name

BEINGESSNER, K L ATTN: TAX DEPARTMENT

SUITE 600, 1100 FIRST STREET SE

City-State-Zip: HAMEL MN 55340-9529 City-State-Zip: CALGARY ALBERTA T2G 1B1

Continues on page 2

ATTN: TAX DEPARTMENT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/27/2015 VP & CFO SIGNATURE: D. D. CHERREY

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 27, 2015

Secretary of State

CC5647435545

Officer/Director Detail Continued:

Title VP

Name DEJOSEPH, T F

Address 3900 ARROWHEAD DRIVE PO BOX 188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP

Name PERKINS, J H

Address 3900 ARROWHEAD DRIVE PO BOX 188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP

Name SETTERLUND, A L

Address 3900 ARROWHEAD DRIVE PO BOX 188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP

Name CARLIN, J M

Address 3900 ARROWHEAD DRIVE PO BOX

188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP

Name CLARINE, J C

Address 3900 ARROWHEAD DRIVE PO BOX

188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title SEC

Name CARLSON, R C

Address 3900 ARROWHEAD DRIVE PO BOX

188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529